Implementation of a structured information transfer checklist improves postoperative data transfer after congenital cardiac surgery

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**Context**

With patient transfer from one unit to another, it is of prime importance to convey a complete picture of the patient's situation to minimize the risk of medical errors and to provide optimal patient care.

**Objective**

To test the hypothesis that implementation of a standardised checklist used during verbal patient handover could improve postoperative data transfer after congenital cardiac surgery.

**Design**

• Prospective, pre-/postinterventional clinical study
• Approval ethical committee
• Forty-eight patients younger than 16 years undergoing heart surgery

**Interventions**

A standardised CHECKLIST was developed containing all data that according to the investigators should be communicated during handover of a paediatric cardiac surgery patient from the operating room to the intensive care unit.

**Main outcome measures**

- Data transfer during the postoperative handover BEFORE and AFTER implementation of the checklist
- Duration of handover, number of interruptions, irrelevant data and confusing data
- Assessment of the handover by using VAS

**Results**

- After implementation of the information transfer checklist, the overall data transfer increased from 48% to 73% (p<0.001)
- The duration of data transfer decreased from a median of 6 min (range 2-16 min) to 4 min (range 2-19 min) (p=0.04)
- The overall handover assessment by the intensive care nursing staff improved significantly (p=0.004)

**CONCLUSION**

Implementation of an information transfer checklist in postoperative paediatric cardiac surgery patients resulted in a more complete transfer of information with a decrease in the handover duration.